## APPLICATION/AFFIDAVIT FOR DUPLICATE MOBILE HOME INSTALLER LICENSE

Date:
License Number
Installer's Name
Installer's Address
I certify that the license described herein has been lost in transit and never received by me, or that the original license issued in my name has been lost or destroyed.
I further certify that if the original license is found or received, I will immediately return it to the Mobile Home Installer Licensing Section, Division of Motor Vehicles.
Installer's Signature
STATE OF COUNTY OF
SUBSCRIBED AND SWORN TO BEFORE ME
THIS, 20
NOTARY PUBLIC
Notary Stamp:
Personally Known OR Produced Identification Type of Identification Produced
(GHQ USE ONLY)
Receipt Date
License reflecting forms control number printed and mailed to mobile home installer at above address on

HSMV 81406 (3/00)